LITERACY FOR MENTAL ILLNESS AND HELP SEEKING BEHAVIOUR

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Abstract
The aim of this research is to investigate society view on mental illness and help seeking behaviours. It will also compare society awareness level of different races in Malaysia. Due to the stigma surrounding mental health issue people are afraid to come forward about their situation and often suffer in silence. If society are more aware, accepting, and stop the negative perception towards this issue, people will not be reluctant to disclose their problems and seek professional helps as they should.

Keywords: Mental illness, mental health, mental disorder, help-seeking, care-seeking, Malaysia

INTRODUCTION

Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community (World Health Organization, 2001). People with good mental health are able to fully enjoy day-to-day activities, people, and their environment. Meanwhile mental illness is a disease of the brain that causes mild to severe disturbances in thought and behaviour, resulting in an inability to cope with life’s ordinary demands and routines (Mental Health Association in Forsyth County, 2016). Even though, mental illness can affect the daily activities of a person but they can still work and function as people with healthy mental if treated accordingly.

Mental illness touches so many people but a stigma still exists around mental health. The stigma that continues to surround mental health problem prevents people from getting the help they need. When you have flu you go to see a doctor for consultation and medication. The same standards that apply to physical illness should also be applied to mental illness. Stigma on mental illness has prevented people from seeking the help that they needed. This research will study the awareness level of different races in Malaysia and help seeking behaviour. Due to the stigma surrounding mental health issue people are afraid to come forward about their situation and often suffer in silence. If society are aware and stop the negative perception towards this issue, people will not be reluctant to disclose their problems and seek professional helps as they should.

Globally, an estimated 450 000 000 people of all ages suffer from depression (World Health Organization, 2014). Although with so many people affected by this problem
however a stigma still surrounds it. Stigma is a negative perception that created prejudice which leads to stereotype and discrimination among a particular group of people. Thus making this an important research to investigate the different races in Malaysia level of knowledge about this issue. Subsequently, study the likelihood to seek help and express their issues. Malaysia is a multicultural country hence a study concerning about the different perception and acceptance about this issue need to be undertaken to decide a method to overcome this stigma.

ISSUES

In this paper, we identify several issues regarding mental illness. Based on our study from previous literature there are some issues that often arise, which are;

- Stigma that often associates with mental illness
- Lack of adequate knowledge about mental illness
- Reluctant to seek medical treatment

RESEARCH QUESTIONS

This research is made to figure the answer to these questions:

- What is the society view on mental illness?
- Would the mental illness sufferers seek professional helps?
- Do different races have different view and help seeking behaviour?

RESEARCH OBJECTIVES

The main objective of this research is to investigate society view on mental illness and help seeking behaviours. Besides that, we also identify the specific objectives which are:

- To find out the level of awareness in society regarding mental illness
- To determine the number of possible sufferers seeks for mental treatment
- To study the different races attitude on this issues

LITERATURE REVIEW AND PROPOSED FRAMEWORK

Mental Health Literacy

A research by Jasvindar Kaur, et al. (2014) revealed that almost one in five Malaysian adolescents are depressed. This means that someone you know might be facing this problem right now. There are over 200 classified forms of mental illness, among them
are; depression (the most common), anxiety, eating disorder, schizophrenia, psychosis, obsessive compulsive disorder (OCD), phobias, bipolar, panic attack, autism, self-harm, dementias and many more. Mental illness touches millions of people in the world but it often goes untreated or unrecognized. One reason for this condition is because the insufficiency of knowledge about psychiatric illness and treatment options for those illnesses (Swami, Loo & Furnham, 2009). Mental illness literacy is the knowledge and belief that recognized mental illness problems. Even in today’s 21st century world, Malaysian citizen are often lacking in knowledge regarding this issue. Everyone has one of those days where they feel sad and blue; it is part of human experience. But for normal people this happen only for a short period of time and it passed. But in some cases it affects the person so much that they started to develop a depression.

Self-perception

Self-stigma or internalizing is a negative thinking or perception that a person has for themselves. Mental illnesses perceive their illness as a sign of weakness and incompetence stemming a feel of small and inferior than other normal people. They often withdraw their self from social interaction. This negative way of thinking that one has for themselves causing them to feel afraid to come out about their illness and seeks treatment. By feeling so it will impede their chance to improve their mental health condition. This has become some sort of a double edged sword battle.

Watson, et al. (2007) persons with mental illness may internalize mental illness stigma and experience diminished self-esteem and self-efficacy. This process is known as self-stigma. This will resulting in limited prospect of recovery. One cannot avoid from having a negative perception about their own mental health condition, but it is up to them to either keep on feeling that way or empower it and change it. The key to challenge self-stigma is empowerment. Besides that, the research also discussed about self-concurrence. It is a situation whereby, an individual agrees with the stereotype that public often endorsed to mental illness. Stereotype agreement happens when an individual accept the common public stereotypes. The process specifically becomes self-stigmatizing with the addition of stereotype self-concurrence in which an individual applies the culturally internalized beliefs to him or herself.

Public perception

To know the level of society knowledge regarding mental illness, we first must grasp their perception about this issue. Research done by Swami (2012) investigates the ability of respondent to recognized mental illness symptom. Only half of the respondent able to identified the symptom while the other is unsure or stated that the person in the vignette did not has mental disorder. This shows that the mental illness literacy among society is still depleted. Angermeyer, Holzinger, & Matschinger (2009) run a research to examine the development of mental health literacy and the desire for social distance towards people with schizophrenia and major depressive disorder in Eastern Germany.
over a time period of eight years. It is found that while there was an increase in the mental health literacy of the public, the desire for social distance from people with major depression and schizophrenia remained unchanged or even increased.

Ainul Hanafiah, & Bortel (2015) discussed about the four main perpetrators that discriminates against mental illnesses are; family, friends, employers, and health workers. Mental illness is a serious topic that needs to be known to all level of societies. The literacy of this topic could help illnesses or potential patient to seek treatment and care that they needed. However with the stigma associated with mental illness it became the biggest barrier that prevents people from getting treatment or retaining their treatment. Most people think that depression is something that people choose to have by overthink. To get the fact straight having mental illness is not an option just like having a flu, cancer, or fever.

Help seeking behaviour

The level of mental health awareness in society contributes to a better help seeking behaviour. The recognition of mental illness without anticipating stigma will encourage adolescents’ help-seeking behaviour. The current hurdle in getting right care and treatment for mental illness is because of the negative perceptions. Illnesses feel ashamed to open up about their feeling, emotions, and conditions to family or friends because fear of being rejected and look down to. Research by Gearing (2014) finds that personal stigma expressed by the respondent tended to be lower than the level of stigma the respondent believed others in the community would hold may indicate that they simply feel freer to share the biases of others than their own. Personal level stigma may have greater effects on females whereas public stigma may exert more influence on males.

Facility and treatment

In Malaysia the mental health facility and professional availability is still low. According to a publication by World Health Organization (2014) for 100, 000 citizens the psychiatric workforce is only 0.8, compared to developed country like United States that has 12.40. We could only do so much to increase the awareness of society knowledge but without adequate mental health facility it is improvident. This situation may be associated with society in taking traditional way in treating mental illness. There are numerous studies that investigate about the relationship between mental health and religious belief (Nurizan Yahaya, 2012; M. S. Nurasikin, 2012).

Mental illnesses often suffer alone and in isolation. In a certain country in Southeast East Asia found that mental illnesses were physically restrains or under confinement in a hut or at their home. This medieval method of handling mental illnesses is disturbing. Violence, concern about the person wandering off or running away and coming to harm, concern about possibility of suicide, and the unavailability of a caregiver are among the
reasons why these mentally ill person were restrain (Harry Minas & Hervita Diatri, 2008). Indonesia is the examples of country that apply this practice although it mostly happened in rural area. Inadequate mental facility and cost of treatment is among the reasons why they choose such method.

Globally, more than 70% of people with mental illness receive no treatment from health care staff (Henderson, C., Evans-Lacko, S., & Thornicroft, G. (2013). Approaches in equipping society with a better knowledge about mental illness will make sure that the people with symptoms will get a proper treatment that they needed. This is because lack of knowledge to identify features of mental illnesses, ignorance about how to access treatment, prejudice against people who have mental illness, and expectation of discrimination against people diagnosed with mental illness. Those are the reasons for treatment avoidance and delays for care. The biggest hurdle of getting treatment and care is also because of stigma.

**Comparison between different races in Malaysia**

A study about public knowledge and beliefs about depression among urban and rural society in Malaysia were undertaken. There are three literatures that focuses on the three most largest race in Malaysia which are Malay, Chinese, and Indian. Viren Swami, Phik-Wern Loo & Adrian Furnham (2009) study the Malay knowledge and beliefs about depression. Phik-Wern Loo & Adrian Furnham (2012) study the Chinese mental health awareness. Afterwards, Viren Swami, Phik-Wern Loo & Adrian Furnham (2013) also conduct a research about the Indian race mental illness awareness. The three researches compare the awareness of mental health between urban and rural population. Findings found that the urban race has shown higher level of mental health literacy rather than rural area.

Malay population which is the largest race in Malaysia often associated mental illness with supernatural causes, God punishment, and excessive mental exertion (Tahir M Khan, Syed A Sulaiman, & Mohamed A Hassali, 2010). It is also found that Chinese females had a comparatively better knowledge of the symptoms of depression in comparison with Malays and Indians. The respondents that participate in the study are non-medical Universiti Sains Malaysia student. Regardless of race Malaysian still low in mental health literacy and there should be a proactive campaign that will help to promote better understanding should be done by the government and other related agencies.
CONCLUSION

This research study the awareness level of different races in Malaysia and help seeking behaviour. Due to the stigma surrounding mental health issue people are afraid to come forward about their situation and often suffer in silence. If society are aware and stop the negative perception towards this issue, people will not be reluctant to disclose their problems and seek professional helps as they should. Current literature review mostly focus on the stigma rather than comparisons between cultural differences between races. Hence, make this research significance. In a nutshell, we can conclude that better mental illness literacy will enhance the seeking of professional helps in terms of help seeking behaviour.

Figure 1. Research Framework.

Mental illness literacy
- Individual awareness and knowledge about the correct facts regarding mental health problems.
  - Self-perception
  - Public perception

Help seeking behaviour
- The likelihood of the mental illnesses to seek for medical treatment or professional helps.
  - Treatment and facility

Mental Illness literacy and help seeking behaviour:
Comparison between different races in Malaysia

Comparison between different races in Malaysia
- Assessing the Malay, Chinese, and Indian that make up the largest race on their perception about mental illness.
REFERENCES


